

The Dressage Foundation's Century Club Application

Name:		
Street Address:		
City:	_ State	_ Zip
Phone number:		
Email address:		
Your date of birth:/	-	
Horse's name:		
Horse's date of birth://////		lowing its foaling date.)
Breed:		
Are you a member of a Dressage Club?	f so, please list t	he Organization/s:
1)		
2)		
What is the anticipated date of your Century	y Club Ride?	
Where do you plan to ride for your Century	Club Membershi	p (Show Name, Location)?
Show Manager's Name:		
Show Manager's Email:		

Do you have a primary contact person other than yourself? If so, what is his/her name and email?
The Dressage Foundation may wish to send out a press release in your area. What is the name of your local newspaper?
How did you hear about the Century Club?

Please mail or email this application to: The Dressage Foundation

1314 'O' Street, Suite 305

Lincoln, NE 68508

Email: jenny@dressagefoundation.org

Questions? Call Jenny Johnson, Executive Director, at (402) 434-8585